

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <u>10656617</u>	FILING DATE <u>09-08-03</u>	
							APPLICANT(S)		
CLAIMS									
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1	1						51		
2		1					52		
3		2					53		
4		1					54		
5		1					55		
6		1					56		
7		1					57		
8							58		
9							59		
10							60		
11							61		
12							62		
13							63		
14							64		
15							65		
16							66		
17							67		
18							68		
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33							83		
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35							85		
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37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.		TOTAL DEP.		TOTAL CLAIMS		TOTAL IND.			
1		7		8		TOTAL DEP.			
						TOTAL CLAIMS			